

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	<i>af</i>	<i>875</i> 1019	<i>6/28</i> 8/10/01 12-17-01

INDEX OF CLAIMS

☒ Rejected  
☐ Allowed  
☐ (Through numeral) Canceled  
☐ Restricted  
☐ N Non-elected  
☐ I Interference  
☐ A Appeal  
☐ O Objected

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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947  
 12/17/01  
 50-617  
 8-11-01